PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

| appropriate. All further indicated unless correcte maintenance fee notificat | ed below or directed oth | ng the Patent, advance on herwise in Block 1, by (a | rders and notification o a) specifying a new cor | f maintenance fees wi respondence address; | ll be mailed to the c and/or (b) indicating | a separate | espondence address as "FEE ADDRESS" for |
|--|--|--|--|---|--|----------------------------|---|
| | | ock 1 for any change of address) | F ps | ee(s) Transmittal. This | certificate cannot be paper, such as an ass | used for an signment or | mestic mailings of the ny other accompanying r formal drawing, must |
| RICHARD D. 1711 W. RIVER GRAND ISLAN | FUERLE RD. | FEB O | 5 2007 E | Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. | | | |
| · | | PATEATO | THAGEN ST | Richard | D. Fue | rle | (Depositor's name) |
| | | | | John Selver | A STORES | 1-31 | (Signature) |
| APPLICATION NO. | FILING DATE | | FIRST NAMED INVENTO | OR I | ATTORNEY DOCKET | | ONFIRMATION NO. |
| 10/605,974 | 11/11/2003 | | Mohammed Azam Huss | | | No. C | 2973 |
| | | TREATING AND DESA | | a''' (12/66/2) ER | E37 EKATLEE E3SE | 18633 188 | :05 3 74 |
| | | | , | 02 FC:13 | | | 780.68 07 388.63 07 |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DU | E PREV. PAID ISSUE | FEE TOTAL FEE(S | S) DUE | DATE DUE |
| nonprovisional | YES | \$700 | \$300 | \$ 0 | \$1000 | , | 04/09/2007 |
| EXAMINER | | ART UNIT | CLASS-SUBCLASS | | | | |
| FORTUNA, ANA M | | 1723 | 210-651000 | · | | | |
| 1. Change of corresponde CFR 1.363). | ence address or indication | n of "Fee Address" (37 | 2. For printing on the | e patent front page, list | . 0. | | D Englis |
| Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. | | | (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, | | | | |
| "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | |
| 3. ASSIGNEE NAME A | ND RESIDENCE DATA | A TO BE PRINTED ON | THE PATENT (print or | type) | | | |
| PLEASE NOTE: Unle recordation as set forth | ess an assignee is identi in 37 CFR 3.11. Comr | ified below, no assignee pletion of this form is NO | data will appear on the | patent. If an assigned | e is identified below, | , the docun | nent has been filed for |
| recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | | | | | |
| | | | | | | | |
| Please check the appropri | ate assignee category or | categories (will not be pr | rinted on the patent): | ☐ Individual ☐ Cor | poration or other priv | ate group ε | entity Government |
| 4a The following fee(s) a | re submitted: | 41 | b. Payment of Fee(s): (Pl | | y previously paid issu | ue fee shov | vn above) |
| * | o small entity discount p | permitted) | Payment by credit card. Form PTO-2038 is attached. | | | | |
| Advance Order - # | of Copies | | The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form). | | | | |
| | us (from status indicated status indicated status) | • | | | | | |
| NOTE: The Issue Fee and | l Publication Fee (if reg | uired) will not be accepte | d from anyone other that | | | | 12,1, |
| nterest as shown by the r | ecords of the United Sta | tes Patent and Trademark | Office. | | | | |
| Authorized Signature | Oderlin D. | Mark | | Date | -3!-07 | | |

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Registration No. 24640